

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>11/14/05</u>		2 Serial/Patent # <u>10/750,616</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time		8/11/05	\$ 1080							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND	\$ 1080							
10 REASON:		8 TO BE REFUNDED BY:									
	Overpayment	Treasury Check									
	Duplicate Payment	Credit Deposit A/C #:									
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> </tr> </table>			5	0	--	2	5	2	5
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<u>Extension of time filed subsequent to maximum extendable period for reply</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>David Bucci</u>			TITLE: <u>Patents Examiner</u>								
SIGNATURE: <u>[Signature]</u>			PHONE: <u>571-272-2099</u>								
OFFICE:											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>			DATE: <u>11/14/05</u>								

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

Aug-11-05

11:30am

From-MATTIONI

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T-194 P.003/008 F-807

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PTO/SB/22 (12-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4878))		Docket Number (Optional) <b>36205-29694</b>
Application Number <b>10/750,616</b>		Filed <b>December 31, 2003</b>
For <b>ARROW REST</b>		
Art Unit <b>3714</b>		Examiner <b>RICCI, JOHN A</b>

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ <b>\$1080</b>

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed. 08/15/2005 CNGUYEN2 00000010 502525 10750616

☐ Payment by credit card. Form PTO-2038 is attached. 01 FC:2255 1080.00 DA

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 502525. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 50,659

☐ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

*Dante C. Rohr* Signature 8/11/05 Date

Dante C. Rohr Typed or printed name 215-624-1600 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PAGE 3/6 \* RCVD AT 8/11/2005 11:31:31 AM [Eastern Daylight Time] \* SVR:USPTO-EFXXF-6/1 \* DHIS:8729306 \* CSID:2159232227 \* DURATION (mm-ss):01-56

Adjustment date: 11/14/2005 AKELLEY  
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